

**DEC 13 2006**Approved for use through 10/31/2002. OMB 0651-0031  
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**REQUEST  
FOR  
CONTINUED EXAMINATION (RCE)  
TRANSMITTAL**

Address to:  
Mail Stop RCE  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Application Number	10/041,144
Filing Date	January 4, 2002
First Named Inventor	ISHIMOTO, et al.
Art Unit	2622
Examiner Name	AGGARWAL, Y.K.
Attorney Docket Number	81784.0247

**This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application.**  
 Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

**1. Submission required under 37 CFR 1.114**

- a. ☐ Previously submitted
- i. ☐ Consider the amendment(s)/reply under 37 CFR 1.116 previously filed on \_\_\_\_\_  
 (Any unentered amendment(s) referred to above will be entered).
- ii. ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on \_\_\_\_\_
- iii. ☐ Other \_\_\_\_\_
- b. ☒ Enclosed
- i. ☐ Amendment/Reply
- ii. ☐ Affidavit(s)/Declaration(s)
- iii. ☒ Information Disclosure Statement (IDS)
- iv. ☒ Other Petition Under 37 CFR 1.313(C) \_\_\_\_\_

**2. Miscellaneous**

- a. ☐ Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of \_\_\_\_\_ months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(i) required)
- b. ☐ Other \_\_\_\_\_

**3. Fees** The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed.

- a. ☒ The Director is hereby authorized to charge the following fees, or credit any of them, to Deposit Account No. 50-1314
- i. ☒ RCE fee required under 37 CFR 1.17(c)
- ii. ☐ Extension of time fee (37 CFR 1.136 and 1.17)
- iii. ☐ Other \_\_\_\_\_
- b. ☐ Check in the amount of \$ \_\_\_\_\_ enclosed
- c. ☐ Payment by credit card (Form PTO-2038 enclosed)
- WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED**

Name (Print Type)	John P. Scherlach	Registration No. (Attorney Agent)	23,009
Signature		Date	December 13, 2006

**CERTIFICATE OF MAILING OR TRANSMISSION**

I hereby certify that this correspondence is being transmitted via facsimile to the Office of Petitions at (571) 273-8300 or mailed to: Mail Stop 313 (c), Commissioner For Patents, P.O. Box 1450, Alexandria, VA 22313-1450 to the U.S. Patent and Trademark Office on the date shown below.

Name (Print Type)	Rhonda Hurt	Date	December 13, 2006
Signature	<i>Rhonda Hurt</i>		

**Burden Hour Statement:** This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND Fees and Completed Forms to the following address: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.